Document 6-3 Filed 10/04/2005 Page 1 of 25 NUMBER **DM** 79563

DATE OF DM: 4 8 00

OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDO	R NAME AND ADDRES	ss						
		v	endor	# <u>107</u>	<u> </u>	InaCom Purchas	e Order Number	Lengt A
	ech who	1						
L						VENDOR INVO	DICE	
					i	Number		
VENDO	PR CONTACT:			·····	(Date	Amount \$,
	WE HAVE I	DEBITE	DΥ	OUR	ACCOL	JNT AS F	OLLOWS	and a state of the
InaCom Part Number	Vendor Part Number	Oty Ordered	Qty Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Deblt Amount
<u>AMS018</u>	195575	24		***********	10.50			_\$ <u>II.</u> 0
ACISIUU	<u> </u>	48	<u> 2,2</u>		22,00			\$ 131240
7385184	<u>430455</u>	2) /	\supseteq		_945.00	>		\$ Sucs. 30
								_ \$
								_ \$
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					 	_		_ \$
NO att	ett i leten	or al					A** ***	
RA 410	IMI A					TOTAL	\$	1.40
er Ou	ance A							
nu So	1460							
1	<i>f</i>							
,	/2_ Supplier #		BLEDG					
BU	OBJECT AMO	V V	SUBL	#				
7.4	THAT KAS	7.40						
	Approval	<u> </u>						
Managor	PP	D-4-					Commence of the Commence of th	
Manager		Date		w				1
Controller		Date				Prepared By:		LEXE
Revised 6/99						Approved By	:ivert	KILL

OMAHA, NE 68154

402-392-3900



Filed 10/04/2005 Page 2 of 25

NUMBER **DM** 79564

DATE OF DM: 4-18-00

ACCOUNTING COPY - BLUE - PINK

Form must be completely filled out.

DEBIT MEMORANDUM

VENDO	R NAME AND ADDRE		# 1500	′(1Ç ¬	InaCom Purchase O	rder Number 4.10	1191-P
	Tech L		# <u>*** ***</u>				
	·				VENDOR INVOICE	•	
			•		Number	· <u>-</u>	
VENDO	OR CONTACT:		· · · · · · · · · · · · · · · · · · ·		Date	Amount \$	
	WE HAVE	DEBITED Y	OUR	ACCO	UNT AS FO	LLOWS	
inaCom Part Number	Vendor Part Number	Qty Qty Ordered Rcv'd	Oty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
Amzsa	451121	4 3		<u>84,50</u>	<u></u>		3 - 19 m
100 1010	454349	1		_82_			
1080014	31010,1	5		000		\$	1.00
011812	-3001			83.40			82.76
1974187	721311	2_		(12.10°		\$	132.
11.80300	7/1/36/0	<u> </u>	***************************************	20,10		\$	3713
भे पापाइट्ड १८०७मध्य	500 E 08 E	17		13,70			18000
40.47 V-400-1		<i>,</i> ,		\$3. ms . de .	TOTAL \$	DNG30	}
Doudle	A LUCCINCO	-(
A Chall	11 B						
A GUILLY	5300						
V							
NACOM Co. #	42 Supplier #	SUBLEDO	BER				
BU	OBJECT AM	BUS YT , TNUC					
SV	1150 1 5/10	(0.20)					
	Approval						
lanager		Date					
ontroller		Date			Prepared By	1201	Δa
evised 6/99					Approved By:	2 11 2 to the	a. 1 (4 x *
COPY - WHITE					мрргочеа ву:	<u> </u>	

VENDOR COPY - CANARY

Document 6-3 Filed 10/04/2005 Page 3 of 25

NUMBER DM 79566



OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

DEBIT MEMORANDUM

VEND	OR NAME AND ADDRE	SS			•		
		Vendo	r# <u>102</u>		InaCom Purchase C	order Number <u>< /</u>	WILL
	Tech	Data					
<u></u>			•		VENDOR INVOIC	E.	
			•		Number		
VEND	OR CONTACT:				Date		
	WE HAVE	DEBITED '	YOUR	ACCO	UNT AS FO	LLOWS	
InaCom Part Number	Vendor Part Number	Oty Oty Ordered Rov'd	Oty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
Action 8	2013813	X ZL		18°,10	<u> </u>		
753003	030402	360 7115		20.M		\$,
***************************************				****		\$	*
				*		<u> </u>	
				 		\$	
	alt was	nc is	·	- , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	<u> </u>
		,,,			TOTAL 6	: <u>1230.</u> 4	
RA 40	16172				IOIAL \$	1 1 4 2 1 1 1	
	NOW 1000.						
-114 OC	MUUS				•		
INACOM Co. #_	UZ Supplier #	SUBLEDO	SER				
BU	OBJECT AMO	UNT TY SUBI	_#				
42	11572 (DE	2.40					
		<u> </u>					
	Approval						
Manager		Date			, · · ·	terring.	
Controller		Date			Danage of B	12	120
Revised 6/99					Prepared By:		
TOVISEU U/33					Approved By:	· WITTER	<u> </u>

FILE COPY - WHITE

VENDOR COPY - CANARY



Document 6-3

Filed 10/04/2005 Page 4 of 25

NUMBER DM 82572

Form must be completely filled out.

	R NAME AND ADDRES	•						
Γ		V	endor#_	163598	InaC	om Purchase (Order Number _	66256.
	TECH DA	277						
				_	VEN	DOR INVOIC	· E	
					Numi	۔ ئر her	19331	149
VENDO	OR CONTACT:				_ Date	11/2/49	Amount \$	149
	WE HAVE D	EBITE	D YO	UR ACC		. ,		
InaCom Part Number A 0 3 7436	Vendor Part Number	Ordered R		ty P.C).	Invoice Price	Difference	Debit Amount
9023878					84	32, 6	-	\$ 104.40
**************************************	1033/040			_ <u>- 30.</u>	35	32,63		\$ 56 9, 70
							-	\$
			*****					\$
	· ·-							S
-					·········			- · · · · · · · · · · · · · · · · · · ·
Par de	- Hykn	 			· · · · · · · · · · · · · · · · · · ·			\$
Ter de	n Hyper	in the	rel	asen		TOTAL \$		74.40
Joen de Product not r	Colored – Please prov	ide signed	 rek gicen	adens		TOTAL \$	L Van	74.40
Product not r	received – Please prov	ride signed I	POD, with	いんナール n/weights, cas	ルザム se count	TOTAL \$	L Vann	\$ 74,40 lerhyden.
್ಯಾಂಡಿಎಎಎ Product not r	received – Please provo	ride signed i	POD, with	Meights, case that he that he that he	se count	TOTAL \$	L Van	\$
Product not r	received – Please provo	ride signed i	POD, with	Weights, case Letter Le 1/4, 1/27	in the se count	TOTAL \$ ElizaL and case pace		\$
Product not r Price Discrep	received – Please provo	ride signed i	POD, with	Weights, case Letter Le 1/4, 1/27	se count			
Product not r	received – Please provo	ride signed i	POD, with	Noweights, case Letter Li My 1127 INACON	se count	Suppl	ier#	SUBLEDGER
Product not r Price Discrep	received – Please provo	ride signed i	POD, with	Noweights, case Letter Li My 1127 INACON	se count	Suppl	ier#	SUBLEDGER
Price Discrep	received – Please provo	ride signed i	POD, with	Noweights, case Letter Li My 1127 INACON	se count	Suppl	ier#	SUBLEDGER
Price Discrep	received – Please provo	ride signed i	POD, with	Noweights, case Letter Li My 1127 INACON	se count	Suppl	ier#	SUBLEDGER
Product not r	received – Please provo	ride signed i	POD, with	Noweights, case Letter Li My 1127 INACON	se count	Suppl	ier#	SUBLEDGER
Product not r Price Discrep Concealed Si	received – Please provo	ride signed f	POD, with	Noweights, case Letter Li My 1127 INACON	M Co. #_U	Suppl	ier#	SUBLEDGER

NUMBER DM 82568

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDOR	NAME AND ADDRES	S					
	_	Vend	dor # <u>163</u>	598	InaCom Purchase	Order Number	0476236
	TECH	DATH	7				
<u> </u>					VENDOR INVOI	CE	
					Number	1668	765
VENDOR	CONTACT:				Number	Z Amount \$	916,88
	WE HAVE [EBITED	YOUR	ACCO	UNT AS F	OLLOWS	
InaCom Part Number	Vendor Part Number	Oty Oty Ordered Roy's		P.O. Price	invoice Price	Difference 2. C	Debit Amount
-							\$ _225.
1	411		· · · · · · · · · · · · · · · · · · ·		-		\$
<u></u>			•	***************************************		<u> </u>	\$
Per Bin,	Pylan in 1 LI m 10/5 ceived – Please pro	wekasir	To was	price	TOTAL d'End mes	\$ 00	\$ \$5. ⁶⁷
Product not rec	peived - Please pro	vide signed PC	D, with/we	ights, case			
	ontage - Zricqu				recorde	y to sen e acasem	diel
		•		INACOM C	ر نے بہار کی ہے o. # Sup	e acarera nerrase. plier#	SUBLEDGER
				BU	OBJECT	AMOUNT	TY SUBL#
					Prepared By: _	Mai	Tan 1
Revised 6/99	· .	42.12	180		Approved By: _		

ACCOUNTING COPY - BLUE - PINK

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

DEBIT MEMORANDUM

						VENDO	OR INVOICE		
						Number		1/5702	749
VENDOR	CONTACT:			······································		Date	in/18/99	Åmount \$	749 5,434. 3
	WE HAVE	DEBIT	ED Y	OUR	ACCO	UNT	AS FO	LOWS	
IneCom Part Number	Vendor Part Number	Qty Ordered	Qty Rev'd	Qty Involced	P.O. Price	,	invoice Price	Difference	Debit Amount
1154753	TO291718	******		-	675.	<u> </u>	910.26		\$ 1,350
				***************************************					\$
				~~~~	···			<u> </u>	\$
			<del></del>	<del></del> -		·			_ \$
		******	<del></del>					<del></del>	\$
	<i>j</i> , .					<del></del>		<del></del>	. \$
The Bun	dyller in	Fac	~~ K	hed p	<u>_6</u>			1	350. 42
					/ /	. 7	TOTAL &	<i>-</i> /,	J 10
رسر مسائد	uce nov	Mil	1000	1124	Capilyil 24	overt.	OTAL \$		J. 10
Product not re	ceived – Please pro	ALL ovide sign	ed POD	بررر with/we,	بر نولنوک ights, case	overt.	,		
Product not re	oceived - Please pro ancy Lance	ALL ovide sign	ed POD	بررر with/we,	بر نولنوک ights, case	overt.	,		
ر کہ ا Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ayyy u ights, case Lyf	overt.	,		*
Product not re	ceived - Please pro ancy Lanc	ALL ovide sign	polico ed POD - Ri	with/we	ights, case  kid	over! count a	/ nd case pack		
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ayyy u ights, case Lyf	over! count a	,		SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	_ SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	ALE ovide signa	polico ed POD - Ri	with/we	ights, case  Life  INACOM (	over! count a	nd case pack	or #	SUBLEDGER
Product not re	ceived - Please pro ancy Lanc	Mare povide signature of the signature o	ed POD  Ro	with/we	ights, case  Life  INACOM (	Count a	nd case pack	or #	SUBLEDGER

**VENDOR COPY - CANARY** 

**OMAHA, NE 68154** Form must be completely filled out. 402-392-3900

# DEBIT MEMORANDUM

VENDO	R NAME AND ADDRES	s							
			Vendor	# <u>113</u>	5 <i>98</i> 7	InaC	om Purchase Orde	er Number 💪	043138
. /	ECH D	274	7						
L						VEN	DOR INVOICE		
						Numb	per	13440	19
VENDO	R CONTACT:					Date	9/28/99 A	mount \$ _ <del></del>	16,500 -
	WE HAVE [	DEBIT	ED \	OUR	ACCC	UN	T AS FOL	LOWS	· · · · · · · · · · · · · · · · · · ·
InaCom Part Number	Vendor Part Number	Qty Ordered	Oty Rov'd	Qty Invoiced	P.O. Price		Invoice Price	Difference	Debit Amount
187296	TD420313	<del></del> -			344	10	350.00		\$ 1,116.
		<del></del>							\$
· · · · · · · · · · · · · · · · · · ·		***************************************		*****					. \$
-									\$
			<del></del>		<del></del>			···	\$
				***************************************					\$
6) The	Kynn my my mecelved - Please pro	1 tace	Kas	· LA	-12c		TOTAL 4	/	111 00
Julian.	war ago	red	to A	45	7/1ne	. //.	JUIAL \$		116
-	• "			, ,,,,,,,,,,,	igino, case	count	and case pack.		
Price Discrep	,								
Concealed Si	hortage	earla	ic til	i Gaz	10th				
					INACOM	Co. #	Supplier	#	SUBLEDGER
		•			BU		OBJECT	AMOUNT	TY SUBL#
			-						
								111 -	<del></del>
	6 6 .	111	~/)			Pre	epared By:	1668	()
sed 6/99	42.1	211				Ap	proved By:	111	

FILE COPY - WHITE

VENDOR COPY - CANARY

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDOR N	AME AND ADDRESS						70
		Vendor	# <u>/lió</u>	1598 Inac	Com Purchase Ord	er Number	10/8092
		7.7					
/2	ECH I	477		l VEN	NDOR INVOICE		
Luan						83757	6
VENDOR (	CONTACT:				1/19/10	) mount ¢	4,399,19
VLIDOII C	WIAVII			Date		modil #	
	WE HAVE DE	BITED Y	OUR	ACCOUN	IT AS FOL	LOWS	
InaCom Part Number		Oty Oty Ordered Rov'd	Oty Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
H133061 _	TD 622363		*****	150.26	153,45	,	\$ 212.76
- Carlotte					***************************************		\$
			<del></del>				\$
		· · · · · · · · · · · · · · · · · · ·					\$
ý.		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		\$
The Lee	- Lyan	ex rele	uff	rke	TOTAL \$	31.	J. H.
Laster m	men ou	1424 4	W/h.	o cent.	the her	Kerpe	ceid
Product not rec	eived - Please provid	ie signea POD ŽŽČE – XZZ	, with/we	eignts, case coul	nt and case pack		
•	rtage			_		12hs	≠.
	R. C.	1		INACOM Co. #	Supplie	or #	SUBLEDGER
	•			BU	OBJECT	AMOUNT	TY SUBL#
				<u> </u>	<del></del>		<u> </u>
						and the same of th	
					Prepared By:	The	10
Revised 6/99	4	2.7.718	0		Approved By:		

10810 FARNAM DRIVE **OMAHA, NE 68154** 402-392-3900

Form must be completely filled out.

VENDO	R NAME AND ADDRE	SS							
		Vend	lor # <u>/ 86</u>	25987	InaCo	m Purchase Or	der Number	96 96	676
enne-ma Se ^r	TECH !	DATA							
						OOR INVOICE	_		
					Numb	er <i>G</i>	1587	108	
VENDO	PR CONTACT:		***************************************		Date _	<u>i fiv feo</u>	587 Amount \$ <u>10</u>	1,840	1.84
	WE HAVE	DEBITED	YOUR	ACCO	UN	Γ AS FO	LLOWS		
InaCom Part Number	Vendor Part Number	Qty Qty Ordered Rcv'd	Qty Invoiced	P.O. Price		Invoice Price	Difference		ebit nount
23 7153E	TD 925368	<u> </u>		413.	29	414.12		<b>\$</b> \$5	J. 3
			-		<del></del> .			\$	
		· · · · · · · · · · · · · · · · · · ·	-					\$	
			***************************************				· · · · · · · · · · · · · · · · · · ·	\$	
			· ·		<del></del> , ,		<del>*************************************</del>	\$	
	l'alt							\$	
The Parket	Kykn	in place	- LANGE	Carlotte St. Carlotte	*	TOTAL \$		35	
☐ Product not	received Please pr	ovide signed PC	Ecresion D. withour	ights asso	- 14. mg	90,000			
Price Discre	pancy Leas	ovide digited i	y Africa	ights, case	count	and case paci	C.		
Concealed S	Shortage	regular.	ter di	- N-					
	ومميا بالمشكلين	ore your conc	7 /7						
					Co. #	Suppli		SUBLED	
		•		BU		OBJECT	AMOUNT	TY SUB	<u> </u>
								<del> </del>	
						2			
		1200			Pre	pared By:	104	466	
Revised 6/99	40.16	2110			App	eroved By:	<del></del>		

Document 6-3

Filed 10/04/2005 Page 10 of 25

NUMBER **DM** 82570

DATE OF DM:

10810 FARNAM DRIVE **OMAHA, NE 68154** 402-392-3900

Form must be completely filled out.

VENDOR	NAME AND ADDRESS	3						
		Ve	ndor # <u>///</u>	25987	InaCom	Purchase Ord	ler Number	72 3365
سسسب	TECH -	DATI	)					
	· .					R INVOICE		
					Number		3148	90 9,496.42
VENDOF	R CONTACT:		······		Date /	117/99	Amount \$	1,496.42
	WE HAVE D	EBITE	YOUR	ACCO	UNT	AS FOI	LOWS	
InaCom Part Number	Vendor Part Number	Ordered Re	Dity Oty cv'd Invoiced	P.O. Price		frivolce Price	Difference	Debit Amount
HO10422	TO 220987			<u> 645.</u>		885. Z	-	\$ 442.64
		<u>.                                    </u>	<del></del>					\$
								\$
				***************************************				\$
				<del></del>	<del> </del>			\$
year den	dynn in	Jeen.	Caren	, AC		TOTAL \$	44	12.64
· · · · · · · · · · · · · · · · · · ·	eceived – Please pro	ense	ecided	not a	Exist 2	ausol.		
Price Discrep			alta			iu case paci	<b>.</b>	,
Concealed SI			ity de				•	
			····/ / / /		Co. #	Suppli	er#	SUBLEDGER
•				BU	<del></del>	OBJECT	AMOUNT	TY SUBL#
							:	
							-76	701
	42.121	$\mathcal{C}(\mathcal{O})$			•	ared By:	- Carl	14 -
Revised 6/99	70.10				Appro	oved By:		

Document 6-3 Filed 10/04/2005 Page 11 of 25

NUMBER **DM** 79483

10810 FARNAM DRIVE **OMAHA, NE 68154** 402-392-3900

Form must be completely filled out.

# **DEBIT MEMORANDUM**

VENDO	R NAME AND ADDRES	S							
			Vendor	#11977	18	InaCom Purc	hase Ord	er Number 🖽 🕧	ME E
-	Tech wa	j M		_					
						VENDOR IN	IVOICE		
						Number	-		
VENDO	R CONTACT:		······			Date		Amount \$	···
	WE HAVE D	EBIT	ED Y	OUR	ACCO	UNT AS	FOL	LOWS	
InaCom Part Number	Vendor Part Number	Oty Ordered	Oty Flov'd	Oty Invoiced	P.O. Price	invo Prk	ice	Difference	Debit Amount
ACCRUSH	TU3dd1/8		****		77.0	<i>y</i> )	770mmmm	S	
***************************************		******		***************************************				\$	
_			<del></del>		***			\$	*
				**********				\$	
				***************************************	······································			\$	
	H wellen	·Cl						پېسون پر	
PA HOEST	45 B					TOTA	AL \$	1200	
nu this	XU46								
	-								
					•				
INACOM Co. # BU	Supplier #OBJECT AMOU		UBLEDG						
/	112931 (7		SUBL	#					
····									
	Approval								
flanager	• •	Date					وم و محمد العني النسور		
Controller						Prepared B	<b></b>	Tinl.	2
evised 6/99	· · · · · · · · · · · · · · · · · · ·	<del></del>		_		Approved 8	-	Shirt K	
						whhtoked t	эy:	S COLLETT	100

FILE COPY - WHITE

VENDOR COPY - CANARY

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDOR NAME AND ADDRESS	•		
Γ	Vendor # 1/1/5		InaCom Purchase Order Number
Toptada			•
Lauren			VENDOR INVOICE
	•		Number (XIVIEX) 7
VENDOR CONTACT:			Date 12/21/6/1 Amount \$ 87,77/100
WE HAVE DEBIT	ED YOUR	ACCO	OUNT AS FOLLOWS
InaCom Vendor Cty Part Number Part Number Ordered	Oty Oty Rcv'd Invoiced	P.O. Price	Invoice Debit Price Difference Amount
	15 24		1210 s 928 D
<u> </u>	<u> </u>		_ 11.36\$5,14.12
			<u> </u>
	**************************************		
			\$
Max roud genel	TUB		
Max frond signed			TOTAL \$ (4574.24
ald pack.	·		
Charles Million			
F			
NACOM Co. # Supplier # SU   BU	JBLEDGER SUBL #		
		,	
Approval	<u> </u>		
Manager Date		,	
ControllerDate			Prepared By:
Revised 6/99 17 18	0		Approved By: EV

NUMBER **DM** 81656

DATE OF DM: 12/04/00

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

### **DEBIT MEMORANDUM**

VENDO	OR NAME AND ADDRESS				
		Vendor	# <i>1025</i> }	107	InaCom Purchase Order Number (A126148
	- 1 1 A				·
·	Tech Mula				
L					VENDOR INVOICE
					Number 36.1080
1 ( <b>1</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					· · · · · · · · · · · · · · · · · · ·
VENDO	OR CONTACT:				Date 12130/19 Amount \$ (33/4)
	WE HAVE DE	BITED Y	OUR	ACCO	OUNT AS FOLLOWS
InaCom Part Number	Vendor Part Number	City City Ordered Rcv'd	Qty Invoiced	P.O. Price	Involce Debit Price Difference Amount
NOTE	10 24(71)	4 5	9		<b>\$</b> 217110
			*****		<b>\$</b>
Manufacturalism					<b>\$</b>
		***************************************	<del></del> .	MVMQ-1-1-1	\$
¥ -	•	Anno New Assessments	<del></del>	···	\$
1	-	· · · · · · · · · · · · · · · · · · ·			\$
Plax	Previde My	acd PC	$\hat{P}_{\lambda}$		TOTAL & CLAD LAC
	HAS MIKEY				TOTAL \$ 361.40
		40-1			
MILLE	Mr.				
INACOM Co. #_	Supplier #	SUBLEDO	GER	•	
BU	OBJECT AMOU				
	Approval				
Manager	- define - con-	Date			
Controller		Date	<u></u>		Prepared By: (utl)
Revised 6/99	17:	_ Date	<del></del>		Si, /
uevisen máa			<i>)</i>		Approved By:

FILE COPY - WHITE

VENDOR COPY - CANARY



NUMBER DM 81652

DATE OF DM:

Form must be completely filled out.

VENDOR NAME AND A	DDRESS	160,170	
	Vendor # ///	InaCom Purchase Order Number	
TECH.	1 DATA		
		☐ VENDOR INVOICE	
	·	Number	
VENDOR CONTACT:		Date 13/3/19 Amount \$	
WE HA	VE DEBITED YOUR	ACCOUNT AS FOLLOWS	
InaCom Vendor Part Number Part Number  7/67478 TD 436		P.O. Involce Debit Price Price Price Amount  34.37 \$36.37	37
		\$ \$	
		<b>\$ \$</b>	
Thease pro	vide a sign	xcC TOTAL \$	
POD w/use	ight), case	count	
a Case	pack.		
INACOM Co. # Supplie		_	
BU OBJECT	AMOUNT TY SUBL#	•	
	·		
Appro	oval		
Manager	Date	111	一十
Controller	Date	Prepared By:	
Revised 6/99	2. 21(0)	Approved By:	
FILE COPY - WHITE	VENDOR COP	- CANARY ACCOUNTING COPY - BLUE -	PINK

NUMBER DM 81650

Form must be completely filled out.

VENDOR NAME AND ADDRESS		1010107
Γ	Vendor # 163598	InaCom Purchase Order Number 4268187
TECH DA	TH	
		VENDOR INVOICE
		Number
		1-600 11.15-676
VENDOR CONTACT:		Date X//X/Amount \$/
WE HAVE DE	BITED YOUR ACC	OUNT AS FOLLOWS
InaCom Vendor Part Number Part Number Or	Oty Oty Oty P.O. dered Rov'd Invoiced Price	nvoice Difference Amount
AU26215 TD442356	53 52 53	
HO37421 TD373129	<u> </u>	11.00 \$ 22.00
A008653 -10366369 3	<u> </u>	331.37 \$ 331.37
AC36227 10442367		30.30
HU08572 TOXO4750	<u> </u>	34.63 \$ 34.63
A129911 1049186 -	<u> </u>	<u>411.35</u> \$ 411.35
A 050179 10801059	1 6 1	1085, 42 1085, 42
7604717 D221780 2	1 a	101AL \$
A034664 70678738	1 & 1	9. 29 9, 20
Thense ground a.	caned 120	1.
Musight, one con	nt, + case part	10THL 4 871.10
INACOM Co. #Supplier #	SUBLEDGER	167HL "-40
BU OBJECT AMOUN	TY SUBL#	~
1		
Approval		
	Data	
	Date	Prepared Ry
0011101101	Date	Q. /
Revised 6/99 42.12180	<u> </u>	Approved By:
L	VENDOR CORY - CANARY	ACCOUNTING COPY - BILLE - PINK

OMAHA, NE 68154

402-392-3900

10810 FARNAM DRIVE

NUMBER DM

Form must be completely filled out.

VENDO	R NAME AND ADDRES	<del>-</del>					
		Vendor i	1625	967 In	aCom Purchase	Order Number	54/13 <u>8</u>
•	FOH D	272)					
L	,,,			J v	ENDOR INVOIC	Œ	
				Ni	umbor	N9421	74
VENDO	OR CONTACT:				1 1	Amount \$	
•	WE HAVE [	DEBITED Y	OUR	ACCOU	NT AS FO	OLLOWS	
InaCom Part Number	Vendor Part Number	Qty Qty Ordered Rcv'd	Qty Invoiced	P.O. Price	Invoice Price	Difference	Debit
H025167	TD407281						Amount 9 Full G
						_	\$
							\$
	· · · · · · · · · · · · · · · · · · ·						\$
			****		***************************************		\$
***************************************				<u> </u>			\$
Mas	ejasight.	le e	450	id -	TOTAL	\$ <u>3,7</u>	46.04
1000 h	yalgar.	h lase	- Cl	list			
							·
2 60	we the	ick.					
INACOM Co. #	Supplier #	SUBLEDG	FR				
BU	OBJECT AMO						
	Approval						1
Manager		Date				manus de la	
Controller		Date	<u>.                                    </u>		Prepared By: .	1/1	116/_
Revised 6/99	42.	13180			Approved By:	EU	

DATE OF DM:

10810 FARNAM DRIVE

OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDOR NAME AND ADDRESS	
	Vendor # 142599 InaCom Purchase Order Number 4553/39
and the second s	
TECH D	977
	VENDOR INVOICE
	Number NTTL283
VENDOR CONTACT:	Date 10/210/19 Amount \$ 44417. 24
	Date 10/2/1/Amount \$ 77, 401.
WE HAVE DEBI	TED YOUR ACCOUNT AS FOLLOWS
InaCorn Vendor City Parl Number Part Number Ordered	Oty Oty P.O. Invoice Debit Rov'd Invoiced Price Price Difference Amount
H121370 10743331 192	196 192 84 14 230, 15 46.00 \$ 8.839.60
	<b>\$</b>
	<u> </u>
	<u> </u>
	<u> </u>
11 Section	a siend total \$ 8,839.68
Theme provide	TOTAL \$ 3,131.
1. 149	Maria 4
(6) whomas	Character war
- a due she	i
- писта и	
DII OD MOT I MINISTER	SUBLEDGER Y SUBL #
:	
Approval	
Manager Date _	
Controller Date _	Prepared By: /////
Revised 6/99 42./2//	Approved By:

DATE OF DM: _

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDO	R NAME AND ADDRESS	3				
	÷	Vendor #	1625/2	InaCom Purchase O	rder Number <u>64</u>	17434
	1604	·> ,	, -			
ŧ	16 64	0/7/				
<u></u>				VENDOR INVOICE		
				Number	1526 F85	
VENDO	R CONTACT:	······································	-	Date 10/14/9	Amount \$	530. EF
	WE HAVE D	EBITED YO	OUR ACC	OUNT AS FO	LLOWS	
inaCom Part Number	Vendor Part Number	Oty Oty	Qty P.O. Invoiced Price	Invoice Price		Debit
AUS4753	T0296718			: 12 900. 20	Difference	Amount
					\$	1,100
	***************************************	**************************************		-	\$	
<del></del>					<b>\$</b>	
· · · · · · · · · · · · · · · · · · ·			<u> </u>		<b></b> \$	····
		·		. 2	<b> 3</b> .	
Thease	- provide	a seg.	ned b	TOTAL \$	1,125.	- 35
			ا ا			
Diac	yar,	Case	Collection			
	use pl					
INACOM Co. #	Supplier #	SUBLEDGE	R			
BU	OBJECT AMOU					
	1		_			
	Approval					
Manager		_ Date				
Controller		Date		Prepared By:	1/10	-/22
Revised 6/99	43	13116	)	Approved By:	8V	
						1

DATE OF DM:

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

**VENDOR NAME AND ADDRESS** 

Form must be completely filled out.

	Vendor # 162579 InaCom Purchase Order Number 4476336
TECH DATA	∤
	VENDOR INVOICE
	Number
VENDOR CONTACT:	Date 14/18/11 Amount \$ 918.26
	The finding from the first
WE HAVE DEBIT	ED YOUR ACCOUNT AS FOLLOWS
InaCom Vendor Ory Part Number Part Number Ordered	Oty Oty P.O. Invoice Difference Debit Amount  L L 675, 19 900, 24 325 45 375, 67
	700. 000.
	<u> </u>
	\$\$
	\$
There provide a white while the course	count total \$ 125.07
7.40	
& Case pue	$\mathcal{M}$ .
INACOM Co. # Supplier # S	SUBLEDGER
BU OBJECT AMOUNT TY	Y SUBL#
Approval	
Manager Date	
ControllerDate	Prepared By: /////
Revised 6/99 42.12.1	

DATE OF DM: _

10810 FARNAM DRIVE OMAHA, NE 68154 402-392-3900

Form must be completely filled out.

VENDOR NAME AND ADDRESS			Joel 71. 121
FOH DAY		InaCom Purchase Order N	umber 64 7636
	<i>لسکر</i> ا	VENDOD HOVOGO	3
		VENDOR INVOICE  Number	383707
VENDOR CONTACT:	7.7744.4.4.774.4.4.4.4.4.4.4.4.4.4.4.4.	Date 14/8/11 Amo	unt \$ 4,532, 70
WE HAVE DEBIT	ED YOUR ACCO	OUNT ÁS FOLL	OWS
InaCorre. Vendor Orly Ordered AUS 4753 TDA'IL TIK 5	Oty Oty P.O. Fice 5 675.	Invoice Price 19 GUU, 24	Difference Debit Amount
			\$\$ \$
Mease provide as w/wayhth, case ~ Case pur	count	TOTAL \$ _	1,125.35
- Case plus	K.		
	UBLEDGER		
BU OBJECT AMOUNT TO	Y SUBL#		
Approval			
• • • • • • • • • • • • • • • • • • • •			
	**************************************	December 5	1/2.75
	180	Prepared By:	1

Form must be completely filled out.

#### **DEBIT MEMORANDUM**

VENDOR	NAME AND ADDRESS		_		1.1-2.221
		Vendor # 2	1025987	InaCom Purchase Ord	er Number <u>104711354</u>
	and the same of th				
	IFCH DI	177			
ì			. 1	VENDOD INVOICE	
<u>L.</u> .			<b>.</b>	VENDOR INVOICE	Western
				Number	1434304
~~ VENDOE	CONTACT:			Date /0/////	Amount \$ 3, 134, 35
					7
	WE HAVE D	EBITED YO	OUR ACCO	OUNT AS FOL	LOWS
InaCom Part Number	Vendor Part Number	Oty Oty Ordered Rcv'd I	Qty P.O. Invoiced Price	Invoice Price	Debit Difference Amount
JULY 3	TO 296 718		3 47	12 900.06	205 07 0 107621
1131120 -		Jane June		<u>,,                                     </u>	3 <u>1617.</u>
		- Parameter - Para			
***		Additional Property of the Control o	***************************************		<b>3</b>
					<b>&gt;</b>
	· · · · · · · · · · · · · · · · · · ·			<u> </u>	<b>5</b>
	·.				
A. A.S.B.	ghts, Car pack.	- a rue	ne de	(D)	675.21
/ Kence				TOTAL \$	
white	ghti, Car	ie com			
7	<i>!</i>				
Mule	- sack.				
	- /				
INACOM Co. #	Supplier #	SUBLEDGE	R		
BU	OBJECT AMO	UNT TY SUBLA	¥		
			_		
		e de la companya de l			
	Approval				
Manager		Date	<del></del>		1
Controller		Date		Prepared By:	JANEV
Revised 6/99	42.12	180		Approved By:	TeV



NUMBER **DM** 82549

Form must be completely filled out.

#### **DEBIT MEMORANDUM**

VENDOR CONTACT:    VENDOR INVOICE   Number   303250	VENDOR NAME A	ND ADDRESS	Vendor 4	# <i>[1025]</i>	<u>18</u> 7	InaCom I	Purchase Orde	r Number <u>6</u> 6	39	4871
Part Number Price	<u></u>					VENDO Number	R INVOICE //3/99 A	203250 mount \$ 2,	0	40. —
Part Northern Part Northern Codered Nov Invoked Price State Sale Sale Sale Sale Sale Sale Sale Sal	WE	HAVE DEBIT	ΓED Y	OUR	ACCO	UNT	AS FOL	LOWS		
Prepared By:	Part Number Part 7/9730/ 107  Part N	Number Ordered  45 + 106   Three Ca		32	Price		\$2.50		\$ \$ \$	Amount 2/640
Prepared By:					INACOM	Co.#	Supplie	er#	su	BLEDGER
Revised 6/99 Approved By:						J	OBJECT			
VENDOR COPY - CANARY ACCOUNTING COPY - BLUE - PINK	Revised 6/99					Арр	roved By:		· · · · · · · · · · · · · · · · · · ·	



NUMBER DM 81701

Form must be completely filled out.

[	and the second s	Vendor # <u>///2</u>	<i>15</i> 1	InaCom Purchase Order	r Number <u>J</u>	48127
<u></u>	CONTACT:	T)		VENDOR INVOICE  Number	96800 mount \$5	
	WE HAVE DEBIT	ED YOUR	ACCO	UNT AS FOL	LOWS	
InaCom Part Number  H0446/7  Meace	Juseights.	Oty Oty Royd invoiced  La I	P.O. Price	Invoice Price 80, 82	S S S S S S S S S S S S S S S S S S S	Debit Amount \$2
BU BU	OBJECT AMOUNT TO			Prepared By:	-7(A)	ter
	10.1011	; s	····	* .	ACCOUNTING C	<u> </u>



NUMBER **DM** 68297 DATE OF DM: April 2, 1998 10810 FARNAM DRIVE

#### **DEBIT MEMORANDUM**

	·						
Tec 53(	on Name AND ADDRE  th Data  I Tech Data Driverwater, FL 346	Ven	dor# <u>259</u>	8 h	naCom Purchase C	rder Number	2940750
					/ENDOR INVOIC	E	
					Number <u> </u>	50	
VEND	OOR CONTACT:K	aren Megkll		<u> </u>	Date <u>1-27-98</u>	_ Amount \$ <u>5</u>	393.70
	WE HAVE	DEBITE	YOUR	ACCOL	JNT AS FO	LLOWS	
InaCom Part Number	Vendor Part Number	Otv C	ty Cty y'd Invoiced	P.O. Price	Invoice Price	Difference	Debit Amount
378836	293261	1 <u>2</u> 1 <u>1</u>	12	423.12	423.12	0	\$ 423.12
				***************************************			\$
	-						_ \$
				*		***************************************	_ \$
					**************************************		_ \$
						***************************************	_ \$
					TOTAL	\$ 423.1	2
Prod	luct not received.	lpc.					
1 60	is damaged						
1 20	·			•			
		,					
orm mus	t be completely fi	lled out.	12103,	/1	Prepared By:	Lust	toka ()
			:				1
levised 5/20/96			·		Approved By:	1	

FILE COPY - WHITE

**VENDOR COPY - CANARY** 



DATE OF DM: _April : 1998

#### 10810 FARNAM DRIVE **OMAHA, NE 68154** 402-392-3900

VENDOR NAME AND ADDRESS		
Tech Data 5301 Tech Data Drive Clearwater, Pt. 34620	Vendor #3598	InaCom Purchase Order Number
· ·		VENDOR INVOICE
		Number <u>6872050</u>
VENDOR CONTACT: Karen Me	gki]	Date 1-27-98 Amount \$ Amount \$
WE HAVE DEBI	TED YOUR A	CCOUNT AS FOLLOWS
InaCom Vendor Cty Part Number Part Number Ordered	Oty Oty d Rov'd Invoiced	P.O. Invoice Debit Price Price Difference Amount
1378836 293261 12	4	23.12 423.12 U \$ 413.12
		TOTAL \$
Preduct not received the season of the See CM # 8957997 at		linse peneise.
Form must be completely filled ou	12103/1 <b>t.</b>	Prepared By:
E CODY WHITE	VENDOR COPY - (	